

ABSTRACTS APRIL 1992

(Lester P, Partridge JC, Cooke M: Postnatal human immunodeficiency virus antibody testing—The effects of current policy on infant care and maternal informed consent. West J Med 1992 Apr; 156:371-375)

Routine human immunodeficiency virus (HIV) antibody screening of umbilical cord blood identifies neonates at risk for HIV infection but may hold risks as well as benefits for infants and mothers. We describe the effect of testing on infant placement and care and report the women's understanding of pretest counseling and consent. In a case-control analysis of 327 tested infants, seropositive infants (13) had a higher rate of discharge to home (62%) than did controls (31%). More case infants (100%) received follow-up care and vaccinations than control infants (46%). Of 32 women interviewed after HIV antibody test informed consent, only 31% understood that a positive cord blood test result was inconclusive for the infant, and most (78%) did not identify any associated socioeconomic risks. Most (88%) stated an interest in learning their serostatus, but only 22% returned for test results. Despite the benefits of HIV antibody testing of at-risk infants, current testing and counseling procedures inadequately inform women, limiting the testing benefits to them.

**POSTNATAL HIV TESTING
HUMAN IMMUNODEFICIENCY VIRUS
ANTIBODY TESTING IN INFANTS**

**INFORMED CONSENT
HIV COUNSELING**

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